MORGAN COUNTY COMMISSION BOARD APPLICATION

Name: Telephone Number (Daytime): Mailing Address:			
		Email Address:	
		Name of Board:	
My reasons for wishing to serve on this board			
My expertise in this area is as follows:			
Additional comments:			
Signature	Date		
(You may attach references and resume)			
Please return your application to:			
Morgan County Commission P.O. Box 668 Decatur, AL 35602	Or Fax to: 256-351-4738		

^{*}Applications will be held on file for a period of two years.